

Requisition Nor.:

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Vendor Remit to: BEST NURSES TOO, INC. 6801 LAKE PLAZE DRIVE #214 Effective Date:

ASA5-5-41 (RFP 4-86)

INDIANAPOLIS IN 46220

Expiration Date: Agency Number: Facility:

08/15/2004 08/14/2005

45893 fota

All State Agency 351901419

Name and Address of Vendor: BEST NURSES TOO, INC. Cntct: RON HERMANN 6801 LAKE PLAZE DRIVE #214 INDIANAPOLIS IN 46220

FAX Number:

Vendor Federal ID: Vendor Telephone Nbr: 317/578-8937-Name Of Contact Pers: RON HERMANN 317/578-8952--

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement. Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number Quantity

UNIT

Article and Description

Unit Price

This is an award of a Quantity Purchase Agreement for Nursing Services for a period of one year to begin August 15, 2004 and end August 14, 2005 or one year from date of last

Instructions for the use of this contract can be accessed at www.in.gov/idoa/proc and click on the following:

- Quantity Purchase Agreements
- 2. Instructions for Nursing Contracts

QPA can be mutually renewed yearly for three additional years.

The vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration date, but issued prior to the expiration date, and postmarked no later than 14 business days after the QPA's expiration date.

Quantities are estimates and could be more or less. The awarded vendor must maintain, at a minimum, the following information and be capable of supplying a report within one week of a request by the State:

1. Quantity and Type of Products, including any options, purchased by any State Agency and/or Political Subdivision, separated by each. 2. Total Dollar value of purchases made, separated by State Agency and/or Political

Subdivision

0.00 HUR00000000100011023 Nursing Services/Best Nurses

0.0000

The following UN/CEFACT Unit of Measure Common Codes are used in this document:

HUR Hour

Signature of Pyrchasing Officer

Typed Name

Date Signed

Signature Of Approval Office Of the

State Attorney General

Typed Name

Please See Contract for Signature Signed by Susan W, Gard, 08/25/04 for Stephen Carter, Attorney General

Authorized Signature

Indiana Department Of Administration

Procurement Division

402 West Washington Street, Rm W468 Indianapolis, Indiana 46204

Telephone: (317) 232-3053

State Form 9955(R9/8-02)-Electronic Version-Approved by State Board Of Accounts, 2002

Pricing for All Districts

Position	1 st Shift rate per hour	2 nd Shift rate per hour	3 rd Shift rate per hour	Overtime rate per hour	Holiday rate per hour
Dental Assistant	\$22.00	\$24.00	\$24.00	X1.5	X1.5
Radiologic Technician	\$50.00	\$55.00	\$55.00	X1.5	X1.5
Behavioral Clinician	\$68.00	\$71.00	\$71.00	X1.5	X1.5
LPN	\$38.00	\$38.00	\$38.00	X1.5	X1.5
RN	\$48.00	\$48.00	\$48.00	X1.5	X1.5
Nurse Practitioner	\$56.00	\$56.00	\$56.00	X1.5	X1.5
Charge Nurse	\$50.00	\$50.00	\$50.00	X1.5	X1.5
Certified Nurse Aide	\$22.00	\$22.00	\$22.00	X1.5	X1.5
Qualified Medication Aide	\$25.00	\$25.00	\$25.00	X1.5	X1.5

All Inclusive Pricing - All Districts

Staff	Rate Per Hour		
Dental Assistant	11100		
Padiologia	\$22.00		
Radiologic Technician	\$50.00		
Behavioral Clinician	\$68.00		
LPN			
RN	\$38.00		
100	\$48.00		
Nurse Practitioner			
Charge Nurse	\$56.00		
Certified Nurse Aide	\$50.00		
Qualified	\$22.00		
Medication Aide			
	\$25.00		